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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/743,315
Filing Date	December 23, 2003
First Named Inventor	PRETLOVE et al.
Group Art Unit	2613
Examiner Name	tba
Attorney Docket Number	43315-201410

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☐ Fee Attached

☐ Amendment / Response

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/ Incomplete Application

☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

☐ Assignment Papers (for an Application)

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ After Allowance Communication to Group

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please identify below):

COMMUNICATION
REGARDING
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Venable
P.O. Box 34385
Washington, D.C. 20043-9998

26694

26694

PATENT TRADEMARK OFFICE

Signature

Eric J. Franklin, Reg. No. 37,134

Date

March 22, 2006

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450b on this date: _____

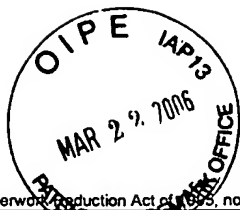
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PTO/SB/17 (12-04v2)
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FEE TRANSMITTAL For FY 2006 <small>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		Complete if Known	
		Application Number	10/743,315
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	December 23, 2003
		First Named Inventor	PRELOVE <i>et al.</i>
		Examiner Name	tba
TOTAL AMOUNT OF PAYMENT		(\$)	0
		Attorney Docket No.	43315-201410

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 22-0261
Deposit Account Name: Venable LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 or HP		x	=		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP		x	=				
HP = highest number of total claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =	/50	(round up to a whole number) x	=				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge):						.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	37,134
Name (Print/Type)	Eric J. Franklin	Telephone	(202) 344-4000
		Date	March 22, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Pretlove et al.

Application No.: 10/743,315

Filed: December 23, 2003

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:
:

Attorney Docket: 43315-201410

Art Unit: 2613

Examiner: to be assigned

For: AN AUGMENTED REALITY SYSTEM AND METHOD

COMMUNICATION REGARDING CORRESPONDENCE ADDRESS

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Please change the correspondence address for this application to reflect the correspondence address associated with customer 26694, which is listed in the power of attorney submitted June 4, 2004, in response to the Notice of Missing Parts mailed April 5, 2004. The correspondence address for customer 26694 is as follows:

Venable LLP
Post Office Box 34385
Washington, DC 20043-9998

Respectfully submitted,

Date:

3/22/06

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